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SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/620,903	07/16/2003	705	3626	GM2:1004RCE

APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/396,883 07/17/2002

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **

09/08/2003

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Verified and Acknowledged	/KRISTINE K RAPILLO/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	TX	15	27
					5

ADDRESS

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TITLE

System, method and apparatus for direct point-of-service health care by a pharmacy benefit manager

FILING FEE RECEIVED 522	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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